



# HAWAII STATE ETHICS COMMISSION ORGANIZATION'S OR INDIVIDUAL'S EXPENDITURES AND CONTRIBUTIONS REPORT

(To be filed by organizations, employing organizations and individuals  
other than registered lobbyists)

FORM ORG

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HAWAII STATE ETHICS COMMISSION  
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STATE OF HAWAII  
STATE ETHICS COMMISSION

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For lobbying reporting period:

- [ ] January 1 - last day of February  
[ ☒ ] March 1 - April 30  
[ ] May 1 - December 31  
Year of Report 2006

Contact person Paul Picardo

Phone (206) 223-6201

Organization Guy Carpenter & Company, Inc.

Mailing Address One Convention Center, 701 Pike Street, Suite 2000  
Seattle, WA 98101

## PART I. TOTAL EXPENDITURES

The total sum or value of all expenditures for the purpose of lobbying during the statement  
period was: \$ 0.00

### EXPENDITURES

Category	Total Amount	Category	Total Amount
1. Preparation & distribution of lobbying materials	\$0.00	7. Entertainment	\$0.00
2. Media advertising	\$0.00	8. Food & beverages	\$0.00
3. Telegraph, telephone and other forms of telecommunication	\$0.00	9. Gifts	\$0.00
4. Postage	\$0.00	10. Loans	\$0.00
5. Compensation paid to lobbyists	\$0.00	11. Other disbursements	\$0.00
6. Fees (other than to lobbyists)	\$0.00	TOTAL EXPENDITURES	0.00

## COMPENSATION PAID TO LOBBYISTS

List in this section the names of all lobbyists and compensation paid to the lobbyists during the statement period.

Name	Address	Compensation paid

## EXPENDITURES OF \$25 OR MORE PER PERSON PER DAY

List in this section all expenditures incurred for the purpose of lobbying of \$25 or more per person per day during the statement period.

☒ This section is not applicable

☐ Expenditures incurred in the total sum of \$25 or more per person per day were made for the following persons:

Name & Address	Amount or value

## AGGREGATE EXPENDITURES OF \$150 OR MORE PER PERSON

List in this section all expenditures incurred for the purpose of lobbying in the total sum of \$150 or more per person during the statement period.

☒ This section is not applicable

☐ Expenditures incurred in the aggregate of \$150 or more per person were made for the following persons:

Name & Address	Amount or value

## PART II. CONTRIBUTIONS RECEIVED

List in this section all contributions received for the purpose of lobbying in the total sum of \$25 or more per person during the statement period.

☒ This section is not applicable

☐ Contributions received in the total sum of \$25 or more per person were received from the following persons:

Name & Address	Amount or value

## PART III. SUBJECT AREAS OF LOBBYING

Legislative and/or administrative action in the following areas was supported or opposed during the statement period:

- |   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> Agriculture                                  | <input type="checkbox"/> Education                      | <input type="checkbox"/> Human Services  | <input type="checkbox"/> Science, Technology & Economic Development |
| <input checked="" type="checkbox"/> Communications & Public Utilities | <input type="checkbox"/> Government Operation & Finance | <input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation                       |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce    | <input type="checkbox"/> Hawaiian Affairs               | <input type="checkbox"/> Labor & Employment  | <input type="checkbox"/> Transportation                             |
| <input type="checkbox"/> Culture, Arts, Historic Preservation         | <input type="checkbox"/> Health                         | <input type="checkbox"/> Planning, Land & Water Use Management                         | <input type="checkbox"/> Other: (indicate below)                    |
| <input type="checkbox"/> Ecology, Energy Environmental Protection     | <input type="checkbox"/> Housing                        | <input type="checkbox"/> Public Safety & Corrections                                   |   |

I hereby certify that the statements made above are correct and complete to the best of my knowledge

Paul E. Picardo  
(Signature of authorized person)

5/19/06  
(Date)

Name of authorized person (type or print) Paul Picardo

Title of authorized person Managing Director